

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	FLTZB		04-26-C1
O.I.P.E. CLASSIFIER	PSD		5/17/01
FORMALITY REVIEW	MMB	954	6/15/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
Final	Original
1	9/17/94
2	V
3	0
4	0
5	0
6	0
7	0
8	0
9	0
10	✓
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15	z
16	z
17	=
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19	z
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21	z
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25	z
26	=
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29	z
30	z
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33	z
34	z
35	z
36	z
37	z
38	z
39	z
40	=
41	z
42	z
43	z
44	✓
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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FEB 15 2011